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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) 3174-000002
In re Application of C. Theodore Peachee et al.		
Application Number 09/803,876		Filed March 12, 2001
For Segmented Stator Switched Reluctance Machine		
Art Unit 2834	Examiner Julio C. Gonzalez	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows  
(check time period desired):

- |   |          |
|---|----------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))   | \$110    |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$ _____ |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))   | \$ _____ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$ _____ |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.         |          |
| <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.   |          |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |          |
| <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.  |          |
| <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>08-0750</u> . |          |
- I have enclosed a duplicate copy of this sheet.

I am the  applicant/inventor.

- assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- attorney or agent of record.
- attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). \_\_\_\_\_.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

April 8, 2004

Date

248-641-1600

Telephone Number

Signature

Michael D. Wiggins

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of \_\_\_\_\_ forms are submitted.